SERIAL NO. FILING DATE **CLAIMS ONLY** APPLICANT(S) CLAIMS AFTER AFTER 1st AMENDMENT 2nd AMENDMENT DEP. IND. DEP. IND. DEP. IND. DEP. TOTAL TOTAL IND. TOTAL DEP. TOTAL DEP.

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

TOTAL CLAIMS

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